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SEP 07 2004

**Mail Stop ISSUE FEE
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INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 4 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1)

7590 06/07/2004

Attention of Karen A. Fitzsimmons
MERCHANT & GOULD P.C.
P.O. Box 2903
Minneapolis, MN 55402-0903

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO, on the date indicated below.

Kate Gannon

(Depositor's name)

Kate G

(Signature)

SEPTEMBER 1, 2004

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/647,585	08/25/2003	Stephen Dale Royle	854.54USDI	2415

TITLE OF INVENTION: AUTO-RELIEVING PRESSURE MODULATING VALVE

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	\$300	\$1630	09/07/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
MICHALSKY, GERALD A	3753	137-625650

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

Merchant & Gould P.C.

2 _____

3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

MICO, Inc.

North Mankato, Minnesota

Please check the appropriate assignee category or categories (will not be printed on the patent); individual corporation or other private group entity government

4a. The following fee(s) are enclosed:

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Issue Fee

A check in the amount of the fee(s) is enclosed.

Publication Fee

Payment by credit card. Form PTO-2038 is attached.

Advance Order - # of Copies 11

The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 13-2725 (enclose an extra copy of this form).

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(Authorized Signature)

(Date)

Sept 1, 2004

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This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Alexandria, Virginia 22313-1450.

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09/08/2004 WASFAW2 00000082 132725 10647585

01 FC:1501 1330.00 DA
02 FC:1504 300.00 DA
03 FC:8001 330.00 DA

TRANSMIT THIS FORM WITH FEE(S)



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: ROYLE Examiner: G. MICHALSKY
Serial No.: 10/647,585 Group Art Unit: 3753
Filed: AUGUST 25, 2003 Docket: 854.54USD1
Confirmation No.: 2415 Notice of Allow. JUNE 7, 2004
Date:
Due Date: SEPTEMBER 7, 2004
Title: AUTO-RELIEVING PRESSURE MODULATING VALVE

CERTIFICATE UNDER 37 CFR 1.8:

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail, with sufficient postage, in an envelope addressed to: Mail Stop ISSUE FEE, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on SEPTEMBER 1, 2004.

By: Kate Gannon
Name: KATE GANNON

Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

23552
PATENT TRADEMARK OFFICE

Sir:

We are transmitting herewith the attached:

- Transmittal Sheet in duplicate containing Certificate of Mailing
- Issue Fee Transmittal Part B (PTOL - 85)
- Please charge our Deposit Account No. 13-2725 in the amount of \$1663.00 (\$1330 Issue Fee Payment, \$300 Publication Fee and \$33 for 11 Patent Copies)
- Return postcard

Please consider this a PETITION FOR EXTENSION OF TIME for a sufficient number of months to enter these papers or any future reply, if appropriate. Please charge any additional fees or credit overpayment to Deposit Account No. 13-2725. A duplicate of this sheet is enclosed.

MERCHANT & GOULD P.C.
P.O. Box 2903, Minneapolis, MN 55402-0903
612.332.5300

By: Karen A. Fitzsimmons
Name: Karen A. Fitzsimmons
Reg. No.: 50,470
KFitzsimmons:PLSklg